Disclosure Itt	eport Cover				☐ Yes ⊠ No				
Use this form for ge	eneral report and committee	information, must be	signed and sul	bmitted along with	other detailed forms.				
Bearing the second second second second	to update information								
1. Committee Info	rmation								
a. Full Name					c. ID Number				
Committee to Elect	Rick Becker				FJM29B				
	lude City, State and Zip Code)				d. Date Filed				
6603 Sadler Rd Waxhaw, NC 2817	73				09/30/2019				
*					e. Phone Number				
					(704) 843-5870				
2. Report Year	3. Period Start Date (mm/	dd/yy) 4. Period (mm/dd/yy)	End Date	5. Treasurer Fu	ll Name				
2019	07/01/2019	09/2	24/2019	Frederick Becke	r III				
6. Type of Commit	tee (Check One)	9. Type of Repor	t (check or	nly one type of repo	rt from one category)				
Candidate Camp		Municipal		County	Referendum				
PAC	Referendum	Organizationa		Organizational	Organizational				
Independent	Joint Fundraiser	Thirty-five da	v -	Quarterly	Pre-referendum				
Expenditure Legal Expense F	_		´ - '						
7. Type of Fund	(if applicable, check one)	Pre-primary		First	☐ Final				
"Booster Fund"	14 TE	Pre-election	١H	Second	Supplemental Final				
Building Fund		Pre-runoff	IH	Third	Annual				
		Semi-annual	lH	Fourth	Special				
		Mid Yea	r -	Semi-annual	Special				
Other:		Year End		Mid Year	10. Special Report Name				
					TO SECURIT AND POST OF THE PARTY OF THE PART				
William A. Committee and the second		Final		Year End					
8. Number of Fund	Iraisers this Report	Final Special	무	Year End Final					
8. Number of Fund	raisers this Report	Final Special		Final					
	0	1 =		Final Special					
8. Number of Fund 11. Account Inform a. Financial Institution	0 nation	1 =	11. Account	Final Special Information					
11. Account Inform	0 nation Full Name	1 =	CONTRACTOR OF THE PROPERTY OF	Final Special					
11. Account Informa. Financial Institution	0 nation Full Name	1 =	CONTRACTOR OF THE PROPERTY OF	Final Special Information	c. Account Code				
11. Account Inform a. Financial Institution First National Bank	0 nation Full Name c. Account Code	Special	a. Financial Ins	Final Special Information	c. Account Code				
11. Account Inform a. Financial Institution First National Bank b. Purpose General Campaign	0 nation Full Name	Special	a. Financial Ins	Final Special Information	c. Account Code				
11. Account Inform a. Financial Institution First National Bank b. Purpose General	0 nation Full Name c. Account Code	Special	a. Financial Ins	Final Special Information	c. Account Code d. Period Begin Balance				
11. Account Inform a. Financial Institution First National Bank b. Purpose General Campaign	0 nation Full Name c. Account Code	Special	a. Financial Ins	Final Special Information					
11. Account Inform a. Financial Institution First National Bank b. Purpose General Campaign	onation Full Name c. Account Code d. Period Begin Balance \$ 304.47	Special	a. Financial Ins	Final Special Information	d. Period Begin Balance				
11. Account Inform a. Financial Institution First National Bank b. Purpose General Campaign Account CERTIFICATION	c. Account Code d. Period Begin Balance \$ 304.47	Special	a. Financial Ins	Final Special Information titution Full Name	d. Period Begin Balance				
11. Account Inform a. Financial Institution First National Bank b. Purpose General Campaign Account CERTIFICATION I certify that the Con	c. Account Code d. Period Begin Balanc 304.47	Special Special	a. Financial Ins b. Purpose able provisions	Final Special Information titution Full Name of Article 22A, 22B	d. Period Begin Balance \$ 3, & 22D-22M of Chapter 163 of				
a. Financial Institution First National Bank b. Purpose General Campaign Account CERTIFICATION I certify that the Couthe NC General State	c. Account Code d. Period Begin Balance 304.47 mmittee or Fund is in complutes and that no funds are co	Special Special iance with all applications of the problem.	a. Financial Ins b. Purpose able provisions nibited or other	Final Special Information titution Full Name of Article 22A, 22H non-disclosed fund	d. Period Begin Balance				
a. Financial Institution First National Bank b. Purpose General Campaign Account CERTIFICATION I certify that the Couthe NC General State	c. Account Code d. Period Begin Balance \$ 304.47 mmittee or Fund is in complutes and that no funds are code correct and that I have bee	Special Special iance with all applications of the problem.	a. Financial Ins b. Purpose able provisions nibited or other	Final Special Information titution Full Name of Article 22A, 22H non-disclosed fund	d. Period Begin Balance \$ 3, & 22D-22M of Chapter 163 of				
a. Financial Institution First National Bank b. Purpose General Campaign Account CERTIFICATION I certify that the Conthe NC General Statis complete, true and Frederick E	c. Account Code d. Period Begin Balance 304.47 mmittee or Fund is in complutes and that no funds are code correct and that I have bee Becker III Printed Name of Signer	iance with all applications in trained by the NC	a. Financial Ins b. Purpose able provisions nibited or other	Final Special Information titution Full Name of Article 22A, 22I non-disclosed fund Elections.	d. Period Begin Balance \$ 3, & 22D-22M of Chapter 163 of s. I further certify that this report				
a. Financial Institution First National Bank b. Purpose General Campaign Account CERTIFICATION I certify that the Conthe NC General Statis complete, true and	c. Account Code d. Period Begin Balance 304.47 mmittee or Fund is in complutes and that no funds are code correct and that I have bee Becker III Printed Name of Signer	iance with all applications in trained by the NC	a. Financial Ins b. Purpose able provisions nibited or other State Board of	Final Special Information titution Full Name of Article 22A, 22I non-disclosed fund Elections.	d. Period Begin Balance \$ 3, & 22D-22M of Chapter 163 of s. I further certify that this report 09/30/2019 Date				
a. Financial Institution First National Bank b. Purpose General Campaign Account CERTIFICATION I certify that the Conthe NC General Statis complete, true and Frederick E	c. Account Code d. Period Begin Balance 304.47 mmittee or Fund is in complutes and that no funds are code correct and that I have bee Becker III Printed Name of Signer	iance with all applications of trained by the NC S	a. Financial Ins b. Purpose able provisions nibited or other State Board of	Final Special Information titution Full Name of Article 22A, 22I non-disclosed fund Elections.	d. Period Begin Balance \$ 3, & 22D-22M of Chapter 163 of s. I further certify that this report 09/30/2019 Date Delivery Method				
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a. Financial Institution First National Bank b. Purpose General Campaign Account CERTIFICATION I certify that the Conthe NC General Statis complete, true and Frederick E	c. Account Code d. Period Begin Balance \$ 304.47 mmittee or Fund is in complutes and that no funds are code correct and that I have bee Becker III Printed Name of Signer DNLY 9/30/19	iance with all applications of trained by the NC S	a. Financial Ins b. Purpose able provisions nibited or other State Board of	of Article 22A, 22H non-disclosed fund Elections.	d. Period Begin Balance \$ 3, & 22D-22M of Chapter 163 of s. I further certify that this report 09/30/2019 Date Delivery Method Normal Mail Registered Mail				
a. Financial Institution First National Bank b. Purpose General Campaign Account CERTIFICATION I certify that the Conthe NC General Statis complete, true and Frederick E FOR OFFICE USE O Date Received: Date Postmarke	c. Account Code d. Period Begin Balance \$ 304.47 mmittee or Fund is in complutes and that no funds are code correct and that I have bee Becker III Printed Name of Signer DNLY 9/30/19	iance with all applications of trained by the NC SEMPloyee: Employee:	b. Purpose able provisions nibited or other State Board of	Final Special Information titution Full Name of Article 22A, 22I non-disclosed fund Elections.	d. Period Begin Balance \$ 3, & 22D-22M of Chapter 163 of s. I further certify that this report 09/30/2019 Date Delivery Method Normal Mail Registered Mail Hand Delivered				
a. Financial Institution First National Bank b. Purpose General Campaign Account CERTIFICATION I certify that the Conthe NC General Statis complete, true and Frederick F FOR OFFICE USE O	c. Account Code d. Period Begin Balance \$ 304.47 mmittee or Fund is in complutes and that no funds are code correct and that I have bee Becker III Printed Name of Signer DNLY 9/30/19	iance with all applications in trained by the NC S	b. Purpose able provisions nibited or other State Board of	of Article 22A, 22H non-disclosed fund Elections.	d. Period Begin Balance \$ 3, & 22D-22M of Chapter 163 of s. I further certify that this report 09/30/2019 Date Delivery Method Normal Mail Registered Mail				

Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.

You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

Detailed Summary

Amendment

Yes No

Use this form to summarize all disclosure reporting forms and to total monetary information.

1. Committee Full Name (and Fund if applicable)	2. Type of Report	EDAMARKE MAY 3	3. ID Number
Committee to Elect Rick Becker	35-Day	F	FJM29B
Start of Election Cycle: January 1,	2019	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 309.47	\$ 304.47
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$
6) Contributions from Individuals	(CRO-1210)	\$	\$ 5.00
7) Contributions from Political Party Committ		\$	\$
8) Contributions from Other Political Committee	tees (CRO-1230)	\$	\$
9) Loan Proceeds	(CRO-1410)	\$	\$
10) Refunds/Reimbursements To the Committee	(CRO-1240)	\$	\$
11) Other Receipt Sources	4		
11a) Interest on Bank Accounts	(CRO-1250)	\$	\$
11b) Contributions from Not-for-Profit Orga	anizations (CRO-1250)	\$	\$
11c) Outside Sources of Income	(CRO-1250)	\$	\$
11d) Legal Expense Fund – Other Sources	(CRO-1270)	\$	\$
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a,	, 11b, 11c, 11d and 11e)	\$	\$ 5.00
EXPENDITURES			
13) Disbursements			G MANAGER TO THE
13a) Operating Expenditures	(CRO-1310)	\$ 259.67	\$ 259.67
13b) Contributions to Candidates/Political C	committees (CRO-1310)	\$	\$
13c) Coordinated Party Expenditures	(CRO-1310)	\$	\$
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$	\$
15) Loan Repayments	(CRO-1420)	\$	\$
16) Refunds/Reimbursements From the Commit	tee (CRO-1320)	\$	\$
17) In-Kind Contributions	(CRO-1510)	\$	\$
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 1.		\$	\$
19) Cash on Hand at End (Add lines 4 and 12 together,		\$ 49.80	\$ 49.80
ADDITIONAL INFORMATION			4
20) Non-Monetary Gifts Given to Other Commit	ttees (CRO-1330)	\$	
21) Outstanding Loans (incl. ones from other car	mpaigns) (CRO-1430)	\$ 3185.01	
22) Debts and Obligations owed By the Committ		\$ 254.67	
23) Debts and Obligations owed To the Committ		\$	
24) Account Transfers Within the Committee	(CRO-1720)	\$	
25) Administrative Support		RECE	V _S ED
	(CRO-1710)	J.	
26) Forgiven Loans	(CRO-1440)	\$ SEP 30	20\$19
27) 48-Hour Notice Reports Sum	(CRO-2200)	\$ Union Co. E	Stions
28) Contributions to be Refunded	(CRO-1215)	\$	\$

				Amend	ment		
Disbursements	Pg	1	of 1		Yes	\boxtimes	N
	- 0	_	_				_

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political

committees and coordinated	party (expenditures
----------------------------	---------	--------------

1. Committee I	Full Name (and Fun	d if applicable)			2. ID Number	
Committee to I	Elect Rick Becker	34.977 B			FJM29B	
3. Type of Dish	oursement (Plea	ise use separate C	CRO-1310 forms for each t	ype of Disbursen	nent.)	
		Contributions to Ca	ndidates/Political Committees	Co	oordinated Party Expenditures	
Sample Distribution Condition Cond						
a. Full Name, Mail	ling Address & Phone		b. Coordinated Committee Na	ame	d. Comments	
	, & zip)					
I describe and the second					_ an	
			c. Level Registered (Specify)			
The second secon				County:	1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
(704) 283-3809)		☐ State	Municipality:	e. Election Sum to Date	
					\$ 5.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i Date (mm/dd/vvvv)	i Amount	b Dequired Demarks	
				- W. P. a		
1	Ck #982	0	07/05/2019	\$5.00	Timing 100	
	P 1		=1,1,7,1,1,1	S		
4 Payes Inform		Daniel Chemical	Add C			
				122477407.4	d Comments	
			b. Coordinated Committee N	ame		
	, « Др)				a li grandanti timi mana	
The second secon			c. Level Registered (Specify)	Transaction of the	Signs	
	28272-1087			County:		
					e. Election Sum to Date	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount		
1	Ck #983	A	09/18/2019	\$254.67	signs	
	No. of the last of	2.3				
				\$		
4. Payee Inform	nation		Add	Remove		
			b. Coordinated Committee Na	ime	d. Comments	
(include city, state,	, & zip)					
			* * * * * * * * * * * * * * * * * * * *			
4						
			State	Municipality:	e. Election Sum to Date	
					\$ MEGETVED	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks 0 2019	
A26				\$	Union Co. Floations	
270		80			Official Go. Elections	
	4	1 1	1 1 1 1 1	\$		
5. Total only th	is Page				\$ 259.67	
6. Total of ALI	CRO-1310 Pages					
The state of the s		The state of the s			\$ 250.67	
					φ 239.07	
		THE RESERVE THE PERSON NAMED IN COLUMN 2 I		res)	A Marie Control of the Control of th	
	A STATE OF THE PROPERTY OF THE PARTY OF THE				STANDARD SERVICE AND ADDRESS OF THE SERVICE AND	
E - Salaries	F* - Equipmen		ical Party		ng Public Office Expenses	
I - Postage	J - Penalties		ice Expenses	O* - Other		
* Codes requir	re detailed explanat	ion in required r	emarks field (k)			

Outstanding Loans

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

1. Committee Full Na	all Name, Mailing Address & Phone		2. ID Number	
Committee to Elect R	ick Becker			FJM29B
3. Lender Informatio	n 🗆	Add	Remove	
		b. Job T	itle/Profession	d. Comments
	p)			
Contraction of the contraction o		Candio	late	
The second control of		e Emple	wor's Name/Cassific Field	e. Start Date (mm/dd/yyyy)
Waxiiaw, NC 20175			yer s Name/Specific Field	04/07/2000
		Self		f. End Date (mm/dd/yyyy)
g. Rate			i. Original Loan Amount	j. Remaining Loan Balance
0 %	None		\$ 1,380.01	\$ 1,380.01
k. Full Name of Lending I	nstitution			1. Loan Number
3 Lender Informatio		Add	□ Permove	
BEAUTIFUL CONTRACTOR AND SERVICE OF		The second second second	The second secon	d. Comments
(include city, state, & zi				u. comments
Frederick Becker III		77		
6603 Sadler Rd				e. Start Date (mm/dd/yyyy)
Waxhaw, NC 28173			10/27/2011	
		Minera	al Springs	f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged		i. Original Loan Amount	j. Remaining Loan Balance
0 %	None		\$ 500.00	\$ 500.00
k. Full Name of Lending I	nstitution			I. Loan Number
3 Lander Informatio		Add	D Passage	
				d. Comments
		Total III	ADDRESS OF THE SECTION OF THE SECTIO	d. Comments
Frederick Becker III				
6603 Sadler Rd				e. Start Date (mm/dd/yyyy)
Waxhaw, NC 28173		c. Emplo	yer's Name/Specific Field	2/28/2013
		a concession in the second		
		Minera	al Springs	f. End Date (mm/dd/yyyy)
		i i		
g. Rate	h. Security Pledged		i. Original Loan Amount	j. Remaining Loan Balance
0 %	None		\$ 5.00	\$ 5.00
k. Full Name of Lending In	ender Information Il Name, Mailing Address & Phone clude city, state, & zip) derick Becker III 3 Sadler Rd xhaw, NC 28173 The property Name/Specific Field Town of Mineral Springs Town of Mineral Springs	I. Loan Number		
			RECEIVE	
4 Total only this Dog			orn 9 a soto	\$ 1,885.01
			SFR 9 U / US	
		CRO-1100)	Union Co. France	\$ 3,185.01

Outstanding Loans

Pg 2 of 3 Amendment Yes No

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

1. Committee Full Na	Il Name, Mailing Address & Phone clude city, state, & zip) Gerick Becker III 3 Sadler Rd xhaw, NC 28173 C. Employer's Name/Specific Field Town of Mineral Springs te h. Security Pledged None	建设在建筑的 类型。	2. ID Number	
Committee to Elect R	ick Becker			FJM29B
3. Lender Informatio	n 🗌 A	dd	Remove	
		b. Job T	itle/Profession	d. Comments
	p)			
		Candio	late	Charles Date (man (2.2) mans)
		c. Emplo	ver's Name/Specific Field	e. Start Date (mm/dd/yyyy)
174111417,170 20175				09/27/2013
		Minera	al Springs	f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged		i. Original Loan Amount	j. Remaining Loan Balance
0 %	None		\$ 200.00	\$ 200.00
k. Full Name of Lending I	nstitution			I. Loan Number
3. Lender Informatio	n A	dd	□ Remove	
	CHAIR SEANNING ROAD TO SELECT AND CHIEF COMME.	STREET, SQUARE, SQUARE		d. Comments
(include city, state, & zi	p)	Financ	e Offier	
Frederick Becker III		Candio	late	
	603 Sadler Rd Vaxhaw, NC 28173	- E1	1. N. 10 18 ELL	e. Start Date (mm/dd/yyyy)
Waxhaw, NC 28173				10/25/2013
		100000000		f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged		i. Original Loan Amount	j. Remaining Loan Balance
0 %	None		\$ 200.00	\$ 200.00
k. Full Name of Lending I	nstitution			1. Loan Number
3. Lender Informatio	on \square A	dd	□ Remove	
				d. Comments
(include city, state, & zi	p)	Financ	e Officer	
Frederick Becker III		Candio	late	
		a EI-	and Name (Constituted Distance	e. Start Date (mm/dd/yyyy)
Waxilaw, NC 20173		_		07/14/2015
		100000000000000000000000000000000000000	7.7	f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged	b. Job Title/Profession Finance Officer Candidate c. Employer's Name/Specific Field Town of Mineral Springs d. Comments e. Start Date (mm/dd/yyyy) 7/14/2015 f. End Date (mm/dd/yyyy)		
0 %	None		\$ 500.00	\$ 500.00
k. Full Name of Lending I	Candidate 3 Sadler Rd chaw, NC 28173 Town of Mineral Springs Town of Mineral Springs	I. Loan Number		
	1	20 20 1	RECEIVE	
4. Total only this Page	ve		000 9 0 2000	\$ 900.00
			SEP 0 0 7019	
		20-1100)	Union Co. Election	\$ 3,185.01

0	uts	tan	ding	Loa	ns
-	er en	Leens	CHILL	Lou	LEG

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

	Lender Information Add Remo Full Name, Mailing Address & Phone (include city, state, & zip) rederick Becker III 603 Sadler Rd Vaxhaw, NC 28173 Rate h. Security Pledged i. Original Loan Amount O % None \$300.00 Full Name of Lending Institution Lender Information Add Remo Full Name, Mailing Address & Phone (include city, state, & zip) rederick Becker III 603 Sadler Rd C. Employer's Name/Specific Field Town of Mineral Springs Lender Information Add Remo Full Name, Mailing Address & Phone (include city, state, & zip) rederick Becker III 603 Sadler Rd Vaxhaw, NC 28173 C. Employer's Name/Specific Field Town of Mineral Springs		2. ID Number			
Committee to Elect R	ick Becker					FJM29B
3. Lender Information	n day day	☐ A	\dd		Remove	
THE PARTY OF THE P				CONTRACTOR OF THE PROPERTY OF		d. Comments
The state of the s	p)					
			Candio	date		
Control of the Contro			. F1			e. Start Date (mm/dd/yyyy)
waxnaw, NC 28173	Lender Information Full Name, Mailing Address & Phone finclude city, state, & zip) rederick Becker III 503 Sadler Rd faxhaw, NC 28173 Rate D None Full Name of Lending Institution Lender Information Full Name, Mailing Address & Phone include city, state, & zip) rederick Becker III 503 Sadler Rd faxhaw, NC 28173 Rate D None Full Name, Mailing Address & Phone include city, state, & zip) rederick Becker III 503 Sadler Rd faxhaw, NC 28173 Rate D None Full Name of Lending Institution Lender Information Full Name, Mailing Address & Phone include city, state, & zip) Lender Information Full Name, Mailing Address & Phone include city, state, & zip)				nc Field	10/15/2015
W			Secretary Control			f End Date (mm/dd/vvvv)
			IVIIIICI	ar Springs		i. End Date (mm/dd/yyyy)
1 1 1 1 A						
g. Rate	ender Information Add Remove	j. Remaining Loan Balance				
0 %	None			\$ 300.00		\$ 300.00
k. Full Name of Lending I	nstitution					I. Loan Number
				27	7 7 7 7 7 7 7	
	A HILL CONTRACTOR OF THE PARTY OF	A	dd		Remove	
						d. Comments
	p)					
			Candio	late		G D
			c Emple	war's Nama/Specif	So Field	e. Start Date (mm/dd/yyyy)
Waxnaw, 11C 20175					ic Field	10/30/2015
			and the same			f. End Date (mm/dd/yyyy)
l'w .			-	a opinigo		a zac cam augggy
Same of the same of the						
g. Rate	h. Security Pledg	ed		i. Original Loan	Amount	j. Remaining Loan Balance
0 %	None		\$ 100.00			\$ 100.00
k. Full Name of Lending I	nstitution					1. Loan Number
3. Lender Informatio	n de la companya de l	ПА	dd		Remove	
				itle/Profession	Remove	d. Comments
					Here is been a sense and the	al community of the second
						I have been a few to the
						e. Start Date (mm/dd/yyyy)
			c. Emplo	yer's Name/Specif	ic Field	
			-			
						f. End Date (mm/dd/yyyy)
						1 4
None \$ 100.00 \$ 100.00 k. Full Name of Lending Institution	j. Remaining Loan Balance					
%	7 7 8	The state of	178	\$	The second second	\$
S. Lender Information	l. Loan Number					
- Page	25.77	1 1				
		4 94		DE	CEDA/CET	
	h. Security Pledged None s 100.00 e of Lending Institution Information e, Mailing Address & Phone ity, state, & zip) h. Security Pledged c. Employer's Name/Specific Field h. Security Pledged i. Original Loan Amount s cof Lending Institution					\$ 400.00
	of ALL CRO-1430 Pages			q	FP 3 0 2019	\$ 3,185.01
(This line must be on line	21 of Detailed Sun	amary Page CR	(0-1100)			φ 5,165.01

Use this form to report any u 1. Committee Full Name (a)	nd Fund if applicable			CS BERRY		2. ID Num	COLUMN TWO IS NOT THE OWNER, THE PARTY NAMED IN	1
Committee to Elect Rick Bec							JM29B	١
3. Creditor Information			Add Remov	10	SECTION SEC		314127B	1
a. Full Name, Mailing Address & (include city, state, & zip)	Phone		Note: All payments made toward debts should be listed on form CRC 1310 with the payee listed as this creditor.					Name and Address of the Owner, where
Capital One, PO Box 71087,	Charlotte, NC 28272-	1087	b. Description of Creditor Capital One Mastercard					
c. Beginning Balance	d. Total Amount Paid		e. Total Amount Incur	rred		f. Remaining	Balance	ł
\$ 0.00	\$	254.67	\$		254.67	\$	0.00	
g. Incurred Debts (what the comm	nittee received this period)							1
1. Purchase Place Full Name, M			g2. Date (mm/dd/yyyy)	g3. Amou	int		1
(include city, state, & zip) Signs on the Cheap - online (signsonthecheap.com), 866-664- 9239		9/5/2019		\$		254.67	1	
		g4. Purpose Code	g5.	Required 1	Remarks			
		O Yard Signs		rd Signs	S			
g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip)		g2. Date (mm/dd/yyyy)	g3. Amount \$			THE REAL PROPERTY.	
			g4. Purpose Code	g5. 1	Required 1	Remarks		
gl. Purchase Place Full Name, Ma	ailing Address & Phone		g2. Date (mm/dd/yyyy)	g3. Amou	int		
(include city, state, & zip)				\$			L	
			g4. Purpose Code	g5. 1	Required I	Remarks		
1. Purchase Place Full Name, Ma (include city, state, & zip)	ailing Address & Phone		g2. Date (mm/dd/yyyy	g3. Amount				
(include city, state, & zip)			\$		\$			
			g4. Purpose Code	g5.]	Required I	Remarks		The second second
1. Purchase Place Full Name, Ma (include city, state, & zip)	ailing Address & Phone		g2. Date (mm/dd/yyyy)	g3. Amou	int	REGE	V
				-	\$		SEP 30	20
		g4. Purpose Code	g5. l	Required I	Remarks	Union Co. E	80	
1. Total only this Page This should be the sum of al	I items 'g3.' from this pa	nge)			\$	254.67		
5. Total of ALL CRO- This line must be on line 22	1610 Pages of Detailed Summary P	age CRC			\$	254.67		Name and Address of the Owner, where
E - Salaries F*	detailed expenditure. Printing Equipment Penalties Lanation in required rem	C* - F G - Po K* - O	undraising litical Party Office Expenses	H*		her Candida	ite ffice Expenses	ACTUAL DESCRIPTION OF THE PERSON OF THE PERS